

<i>SERFF Tracking Number:</i>	<i>SNLF-126993742</i>	<i>State:</i>	<i>Arkansas</i>
<i>Filing Company:</i>	<i>Sun Life Assurance Company of Canada</i>	<i>State Tracking Number:</i>	<i>48065</i>
<i>Company Tracking Number:</i>	<i>ERR ENDORSEMENT</i>		
<i>TOI:</i>	<i>H12 Health - Excess/Stop Loss</i>	<i>Sub-TOI:</i>	<i>H12.004 Self-Funded Health Plan</i>
<i>Product Name:</i>	<i>Group Stop Loss</i>		
<i>Project Name/Number:</i>	<i>ERR Endorsement/</i>		

Filing at a Glance

Company: Sun Life Assurance Company of Canada

Product Name: Group Stop Loss

SERFF Tr Num: SNLF-126993742 State: Arkansas

TOI: H12 Health - Excess/Stop Loss

SERFF Status: Closed-Approved-Closed
Closed

Sub-TOI: H12.004 Self-Funded Health Plan

Co Tr Num: ERR ENDORSEMENT State Status: Approved-Closed

Filing Type: Form

Reviewer(s): Rosalind Minor

Authors: James Crowley, Sandra
Silcott, Marion Pagluica, Lori
Chilcote, Pauline Michaud, Ellen
Thibodeau, Linda Murphy, Frank
Jancura

Disposition Date: 03/01/2011

Date Submitted: 02/23/2011

Disposition Status: Approved-Closed

Implementation Date Requested:

Implementation Date:

State Filing Description:

General Information

Project Name: ERR Endorsement

Status of Filing in Domicile: Pending

Project Number:

Date Approved in Domicile:

Requested Filing Mode: Review & Approval

Domicile Status Comments:

Explanation for Combination/Other:

Market Type: Group

Submission Type: New Submission

Group Market Size: Small

Group Market Type: Employer

Overall Rate Impact:

Filing Status Changed: 03/01/2011

State Status Changed: 03/01/2011

Deemer Date:

Created By: Lori Chilcote

Submitted By: Lori Chilcote

Corresponding Filing Tracking Number:

Filing Description:

RE: Sun Life Assurance Company of Canada

NAIC #80802 FEIN 38-1082080

Stop Loss Policy Amendment

Form No. 07-SL-ERR

SERFF Tracking Number:	SNLF-126993742	State:	Arkansas
Filing Company:	Sun Life Assurance Company of Canada	State Tracking Number:	48065
Company Tracking Number:	ERR ENDORSEMENT		
TOI:	H12 Health - Excess/Stop Loss	Sub-TOI:	H12.004 Self-Funded Health Plan
Product Name:	Group Stop Loss		
Project Name/Number:	ERR Endorsement/		

Dear Commissioner:

The above referenced Group Stop Loss Policy form is being submitted for your review and approval.

This is a new form and does not replace any previously approved forms.

This form is an amendment that will be attached to our Stop Loss Policy Form 07-SL, previously approved by your department on May 4, 2007. The form adds an optional Experience Rating Refund provision to the Stop Loss policy.

Attached to this filing are any applicable state required fees, transmittal forms and certifications.

The form submitted is in final print form, subject only to minor variations in color, paper stock, duplexing, shading, fonts and positioning. The form meets the requirements of the Flesch Readability Test. Enclosed is a certification signed by an officer of our company.

We request the Department's approval of the enclosed form. If you have any questions or comments regarding this submission, please do not hesitate to contact me at: (860) 737-1310, or by email : James.Crowley@sunlife.com.

Company and Contact

Filing Contact Information

James Crowley, Compliance Consultant	James.Crowley@sunlife.com
175 Addison Road	800-451-2513 [Phone] 1310 [Ext]
P.O. Box 725	860-737-6598 [FAX]
Windsor, CT 06095-0725	

Filing Company Information

Sun Life Assurance Company of Canada	CoCode: 80802	State of Domicile: Michigan
175 Addison Road	Group Code: 549	Company Type:
Windsor, CT 06095	Group Name:	State ID Number:
(860) 737-1000 ext. [Phone]	FEIN Number: 38-1082080	

Filing Fees

<i>SERFF Tracking Number:</i>	<i>SNLF-126993742</i>	<i>State:</i>	<i>Arkansas</i>
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Fee Required?	Yes
Fee Amount:	\$50.00
Retaliatory?	No
Fee Explanation:	1 form x \$50 = \$50
Per Company:	No

COMPANY	AMOUNT	DATE PROCESSED	TRANSACTION #
Sun Life Assurance Company of Canada	\$0.00	02/23/2011	
Sun Life Assurance Company of Canada	\$50.00	03/01/2011	45149999

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<i>Product Name:</i>	<i>Group Stop Loss</i>		
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Correspondence Summary

Dispositions

Status	Created By	Created On	Date Submitted
Approved-Closed	Rosalind Minor	03/01/2011	03/01/2011

<i>SERFF Tracking Number:</i>	<i>SNLF-126993742</i>	<i>State:</i>	<i>Arkansas</i>
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<i>Product Name:</i>	<i>Group Stop Loss</i>		
<i>Project Name/Number:</i>	<i>ERR Endorsement/</i>		

Disposition

Disposition Date: 03/01/2011

Implementation Date:

Status: Approved-Closed

Comment:

Rate data does NOT apply to filing.

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Schedule	Schedule Item	Schedule Item Status	Public Access
Supporting Document	Application	Approved-Closed	Yes
Supporting Document	Flesch Certification	Approved-Closed	Yes
Supporting Document	Statement of Variability	Approved-Closed	Yes
Form	Stop Loss Policy Amendment	Approved-Closed	Yes

SERFF Tracking Number: SNLF-126993742 State: Arkansas

Filing Company: Sun Life Assurance Company of Canada State Tracking Number: 48065

Company Tracking Number: ERR ENDORSEMENT

TOI: H12 Health - Excess/Stop Loss Sub-TOI: H12.004 Self-Funded Health Plan

Product Name: Group Stop Loss

Project Name/Number: ERR Endorsement/

Form Schedule

Lead Form Number:

Schedule Item	Form Number	Form Type Form Name	Action	Action Specific Data	Readability	Attachment
Approved-Closed 03/01/2011	07-SL-ERR	Policy/Cont Stop Loss Policy ract/Fratern Amendment al Certificate: Amendmen t, Insert Page, Endorseme nt or Rider	Initial		52.500	07-SL- ERR.pdf

Sun Life Assurance Company of Canada

Policy Endorsement

Policyholder: 1[ABC Company]

Policy Number: 2[12345]

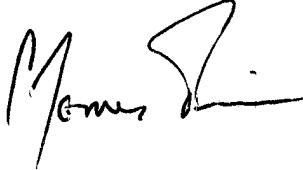
Section VI, "General Provisions," shall include:

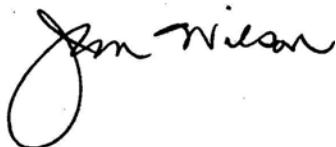
Experience Rating Refund

On each Policy Anniversary a retrospective experience rating refund process is applied to the 3[Specific Benefit] 4[and Aggregate Benefit]. Sun Life allots to this Policy such amount, if any, as Sun Life determines to be available as a refund as a result of that process. Sun Life reserves the right to change the basis of this process.

It is agreed this Policy Endorsement is effective on 5[January 1, 2003] and is part of the Policy to which it attaches.

Signed for the Company at Wellesley Hills, Massachusetts.

6 []
President

]
Secretary

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<i>Project Name/Number:</i>	<i>ERR Endorsement/</i>		

Supporting Document Schedules

		Item Status:	Status
			Date:
Bypassed - Item:	Application	Approved-Closed	03/01/2011
Bypass Reason:	n/a		
Comments:			

		Item Status:	Status
			Date:
Satisfied - Item:	Flesch Certification	Approved-Closed	03/01/2011
Comments:			
Attachment:			
AR FleschCert.pdf			

		Item Status:	Status
			Date:
Satisfied - Item:	Statement of Variability	Approved-Closed	03/01/2011
Comments:			
Attachment:			
Explanation of Variables-SLOC.pdf			

**SUN LIFE ASSURANCE COMPANY OF CANADA
FLESCH SCALE READABILITY CERTIFICATION**

Form Number
07-SL-ERR

Readability Score
52.5

This is to certify that the Form Numbers listed below have achieved the following Flesch Reading Ease Scores and comply with the requirements of Arkansas Stat. Ann. §§66-3251 through 66-3258, cited as the Life and Disability Insurance Policy Language Simplification Act.

Linda W. Murphy

By: _____
Linda Murphy
Associate Director

Sun Life Assurance Company of Canada
Statement of Variability for form No. 07-SL-ERR

Variable No.	Explanation of Variable
1	Varies by the policyholder's name.
2	Varies by the assigned policy number.
3	Included if the policyholder includes the Specific Benefit.
4	Included if the policyholder includes the Aggregate Benefit.
5	Varies by the effective date of the amendment.
6	Officer's signature will vary to reflect future change.